| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | ORD | Application of Docket Number | | | |
|---|--|---|--------------|------------------------------|---------------------|------------------|-----------|---------------------|------------------------------|---------|---------------------|------------------------|
| | | | | | | | | | 101554224 | | | |
| | | CLAIMS A | S FILED - I | | (Column 2) | | SMALL ENT | m _′ | OR | OTHER 1 | | |
| U.S. NATIONAL STAGE FEES | | | | | (Go.G.III Z) | |] | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 360 |
| EXAMINATION FEE | | | | | | | 1 | EXAM. FÉE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | 1 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minu | s 1 0 0 = | / 50 = | | | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 14 min | us 20 = | • | | | X \$ 25 = | · | OR | X \$ 50 = | / |
| INDEPENDENT CLAIMS | | |) m | inus 3 = | • [| | | X \$ 100 = | | OR | X \$ 200 = | 7 |
| MULTIPLE DEPENDENT CLAIM PRE | | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 900 |
| | | | | | mn 2) | (Column 3) | - | SMALL E | NTITY | OR | OTHER 1 | |
| AMENDMENTA | | CLAIMS REMAINING AFTER AMENDMENT | · | HIGH NUM PREVK PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | *** | <u></u> | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | · Song | Minus | *** | | n) | | X \$ 100 = | | OR | X \$ 200 = | ' |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | ær | + \$ 360 = | |
| | | | | | | | _ | TOTAL ADDIT. | | OR | TOTAL ADDIT. | |
| | | (Column 1) | | (Colu | mn 2) | (Column 3) | | | | | | į |
| AMENDMENT B | • | CLAIMS REMAINING AFTER AMENDMENT | Ť | HIGH NUM PREVK PAID | EST BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | •• • | | a | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| AME | Independent | •. | Minus | *** | | s | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | ULTIPLE DEPE | NDENT | CLAIM | | 11 | + \$ 180 = | | OR | + \$ 380 = | |
| | | | - | | | | | TOTAL ADDIT. FFF | - | OR | TOTAL ADDIT. FFF | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is tess than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |